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MESSAGE:

Attached is our Request for Continued Examination, Examiner Interview Summary and Response and Amendment for Serial No. 09/829,763

ORIGINAL DOCUMENT:

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NUMBER OF PAGES (Including Cover):

12) JAP

CONFIRMATION NO.:

CLIENT MATTER NO.:

29288,0400

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PTO/SB/21 (09-04) Approved for use through 07/31/2006, OMB 0851-0031 Doc U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/829,763 TRANSMITTAL April 10, 2001 Filino Date **FORM** First Named Inventor Osamu Shibata, ct al. Art Unit 2135 Odaiche T. Akpati Examiner Name (to be used for all correspondence after initial filing) 29288.0400 Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply After Allowance Communication Fee Transmittal Form Drawing(s) to TC Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer identify below): Extension of Time Request Request for Continued Examination (RCE) Express Abandonment Request Request for Refund CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Document(s) Ramarks Response to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT SNELL & WILMER LLP, One Arizona Center, 400 East Van Buren, Phoenix, Arizona 85004-2202 Firm Name Signature Shahpar Shabpar Printed name Reg. No. 45,875 Date CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsirule transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria,VA 22313-1450 👀 the Signature Date Typed or printed name Sheila Bowman

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382 V 667 6 1 1 5 7 1 2 7 3 8 3 0 0

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Effective on 12/08/2004.				Complete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Nur	mber	09/829,763					
FEE TRANSMITTAL			Filing Date		April 10, 2001						
for FY 2005			First Named In	ventor	Osamu Shibata, et al-						
				Examiner Nam	θ	Odaiche T. Akpati					
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		2135						
TOTAL AMOUN	T OF PAYMENT	(\$) \$91	0.00	Attorney Docke	et No.	29288.0	0400				
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FEE CALCULAT	ION			•							
1. BASIC FILING	SEARCH, AND E	CAMINATION FE	ES								
						TION FEES					
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee_(\$)	F	ee (\$)	Small Entity Fee (\$)	Fees Paid(\$)			
Utility	300	150	500	250		200	100				
Design	200	100	100	50		130	65				
Plant	200	100	300	150		160	80				
Reissue	300	150	500	250		600	300				
Provisional	200	100	0	0		0	0				
2. EXCESS CLAI	M FEES						Fee (\$)	Small Entity Fee (\$)			
Each claim over 2	0 (including Reissu	es)					50	25			
Each Independent	claim over 3 (inclu	ding Reissues)					200	100			
Multiple dependen	t claims						360	180 Dependent Claims			
Total Claims	Extra Clain	ns Fee (\$)		Fee Pald (\$)			Fee_(\$)	Fee Paid (S)			
	or HP =	x <u>\$50</u>	.00	= \$0.00							
•	of total claims paid for			For Bold (6)							
Indep. Claims - 3 d	<u>Extra Clain</u> or HP =	<u>ns Fee (\$)</u> x \$200	.00 :	Fee Paid (\$) = \$0.00							
HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION	SIZE FEE and drawings exce	ed 100 chasts of	naner /	evoludina electro	onically	filed sen	uence or com	muter listing under			
l 37 CFR 1.52(e)), t	he application size tal. a)(1)(G) and 37 CFI	ee due is \$250 (\$	125 fo	r small entity) for	each a	dditional	50 sheets or	fraction thereof.			
Total Sheets	Extra Sh		ber of e	ach additional 50	or fracti	on therec	M Fee (1	Fee Pald (\$)			
	- 100 = <u>0</u>	/50	_0	(round up	to a who	ole	× _\$250.06				
4. OTHER FEE(\$) No. Exclish coordination 5130 for (no small antity discount)											
Non-English specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Request for Continued Examination (RCE)-\$790&1-month extension-\$120 \$910.00											
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Shahpar Shahpar